FORM D



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR NIFORM LIMITED OFFERING EXEMPTION

/	371	466
	OMB APP	PROVAL

OMB APPROVAL				
OMB Number:	3235-0076			
Expires:				
Estimated average	je burden			
hours per respons	se 16.00			

SEC US	SE ONLY
Prefix	Serial
DATE P	ECEIVED
	1

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	· · · · · · · · · · · · · · · · · · ·	<u> </u>
PureSpectrum, Inc. Note Conversion		
Filing Under (Check box(es) that apply):	[] ULOE	
Type of Filing: New Filing Amendment		
	<u> </u>	RECEIVED
A. BASIC IDENTIFICATION DATA		1691
1. Enter the information requested about the issuer	< NOV	0 7 200g
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	18	
PureSpectrum, Inc.	JEN.	A CONTRACTOR OF THE PARTY OF TH
Address of Executive Offices(Number and Street, City, State, Zip Code)	Telephone Numb	r (Including Area Code)
5801 Abercom Street, Savannah, GA 31405	(912) 695-0352	<u>\\</u>
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Numb	er (Including Area Code)
Brief Description of Business		
•		PROCESSEL
Type of Business Organization		•
✓ corporation ☐ limited partnership, already formed ☐ other (p ☐ business trust ☐ limited partnership, to be formed	olease specify):	NOV 1 7 2006
Month Year	•	THOMSON
Actual or Estimated Date of Incorporation or Organization: 0 6 8 8 Actual Estim		FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State		7
CN for Canada; FN for other foreign jurisdiction)		
GENERAL INSTRUCTIONS	į,	•
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 17d(6).	or Section 4(6), 17 CF	R 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.		
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.	•
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.		not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repothereto, the information requested in Part C, and any material changes from the information previously suppled to the filed with the SEC.		
Filing Fee: There is no federal filing fee.	•	
State:		1
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for s ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the S are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim fo accompany this form. This notice shall be filed in the appropriate states in accordance with state law. this notice and must be completed.	Securities Administra or the exemption, a fe	tor in each state where sales e in the proper amount shal
ATTENTION	 	···
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.		

2. Enter the information requested for the following:		<u> </u>	
• Each promoter of the issuer, if the issuer has been organized within the	e past five years;	•	• .
Each beneficial owner having the power to vote or dispose, or direct the v	vote or disposition of, 10	% or more of a clas	s of equity securities of the issuer.
Each executive officer and director of corporate issuers and of corporat	te general and managing	partners of partne	rship issuers; and
Each general and managing partner of partnership issuers.	•	:	; ;
Check Box(es) that Apply: Promoter Beneficial Owner D	Executive Officer	Director	General and/or
			Managing Partner
Full Name (Last name first, if individual)		:	
Vanatta, Lee L.			
Business or Residence Address (Number and Street, City, State, Zip Code) 5801 Abercorn Street, Savannah, GA 31405			
Check Box(es) that Apply: Promoter Beneficial Owner DE	Executive Officer	Director [General and/or Managing Partner
Full Name (Last name first, if individual)			
Norton, William R.		•	
Business or Residence Address (Number and Street, City, State, Zip Code)			
5801 Abercorn Street, Savannah, GA 31405			
Check Box(es) that Apply: Promoter Beneficial Owner DE	Executive Officer .	Director [General and/or Managing Partner
Full Name (Last name first, if individual) Norton, Susan			
Business or Residence Address (Number and Street, City, State, Zip Code)		, ,	,
5801 Abercom Street, Savannah, GA 31405	•	!	
Check Box(es) that Apply: Promoter Beneficial Owner E	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Check Box(es) that Apply: Promoter Beneficial Owner E	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		<u> </u>	
1			~ ,
Business or Residence Address (Number and Street, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·	1	
Check Box(es) that Apply: Promoter Beneficial Owner E	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)	j		
Check Box(es) that Apply: Promoter Beneficial Owner E	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)	•		
			•
Business or Residence Address (Number and Street, City, State, Zip Code)		•	

		•		B. (NFORMAT	ION/ABOU	TOFFER	NG *				·
			La Jane		11 4			- A.S PP.		1	Yes	No
1. Has the	s issuer sole	a, or does t			ll, to non-a							X
•	•				n Appendix,		_			!	. 51	000.00
2. What is	s the minin	um investn	nent that w	ill be acce	pted from a	ıny individ	ual?				\$_ 3, (
9 25	<i>CF</i> :	·. 		61-	.1:+0					,	Yes	No
		-		_	de unit?	•				,		X
					who has been of purchase							•
If a pers	son to be lis	sted is an as	sociated pe	rson or age	ent of a brok	er or deale	r registere	d with the S	SEC and/or	with a state	:	•
					ore than five ion for that				ciated pers	ons of such	ı.	
Full Name (· · · · · · · · · · · · · · · · · · ·			- III(OIMIAI.	ion ioi mai	- DIORCI OI	dealer on	J+.		· · · · · · · · · · · · · · · · · · ·		• .
run Name (Last name	msi, n mu	ividuai)						•			
Business or	Residence	Address (N	lumber and	i Street, C	ity, State, Z	Cip Code)						
		`				. ,	• "				•	
Name of As	sociated B	roker or De	aler							1		,
										· · · ·		
States in W	i						•					
(Check	"All State	s" or check	individual	States)	****************		***************************************	······································			_ [A	ll States
AL	[AK]	ΑŹ	AR	CA	[CO]	CT	DE	[DC]	[FL]	[GA]	HI	m)
	[IN]	ĪĀ	(KS)	KY	LA)	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	\overline{WY}	PR
			 							!		
Full Name (Last name	first, if ind	ividual)		-						•	
Business or	r Residence	Address ()	Number an	d Street C	City. State	Zip Code)	· · · · · · · · · · · · · · · · · · ·	·	•			
		·	uu uli		,, 1	p				•		
Name of As	sociated B	roker or De	aler		· · · · · · · · · · · · · · · · · · ·	· 	·		 	•	,	
	<u> </u>		:		·							
States in W	.i									·		
(Check	"All State	s" or check	individual	States)	•				. 1		□ A	Il States
[AL]	[AK]	AZ	AR	CA	CO	CT	DE	DC	·FL	[GA]	Ħ	[ID]
	[X]	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name (Tast name	first if ind	ividuāl\~~	~				4				
r am raume (The name	mai, II IIIU								!		
Business or	r Residence	Address (Number an	d Street, C	City, State,	Zip Code)	· · · · · · · · · · · · · · · · · · ·		•			
•		·			<u>.</u>						•	
Name of As	sociated B	roker or De	aler							1		
, G	1	,								1		
States in W			•							- :		•
(Check	"All State	s" or check	individual	States)	•••••		••••••		•••••		A	ll States
AL	AK	ΑZ	AR	CA	CO	CT	DE]	DC	FL	GA	HI	[ID]
ĪL	[N]	ĪĀ	KS	KY	LA	ME	MD	· MA	MI	MN	MS	MO
MT	NE	NV	· NH	NJ	NM	NY	NC	ND	ОH	OK	OR	PA .
RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

GOFFERING PRICE NUMBER OF INVESTORS EXPENSES AND USE OF PROCEEDS

			1			•
l. '	Enter the aggregate offering price of securities included in this offering and the total amount already		i	•		
	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \prod and indicate in the columns below the amounts of the securities offered for exchange and					
	already exchanged.		1 •			
			gregate		Αr	nount Already
	Type of Security	Offe	ring Pri	ice		Sold
	Date	ь.			c	
	Debt	150	,000.0	·	3	20 405 00
	Equity	<u> </u>	,,000.0		\$	20,405.00
	Common Preferred		•			•
	Convertible Securities (including warrants)	s _			\$	
	Partnership Interests	S			\$	•
	Other (Specify)		1			
			0.000,	00	Ψ <u></u>	20,405.00
		\$	1,7.3.1.	-	\$'	20,700.00
	Answer also in Appendix, Column 3, if filing under ULOE.					
	Enter the number of accredited and non-accredited investors who have purchased securities in this		1			
	offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate	1	•			
	the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		•			
	parentales on the following parents of the second of the s		1			Aggregate
		Nι	ımber			ollar Amount
		In	vestors			of Purchases
	Accredited Investors				\$_	120,405.00
	Non-accredited Investors	0	<u> </u>		\$_	0.00
	Total (for filings under Rule 504 only)	1			. s _	120,405.00
	Answer also in Appendix, Column 4, if filing under ULOE.				_	
1	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities					•
•	sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the					
	first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.					
		T-	; 		•	_11 A
	Type of Offering		ype of curity		ı,	ollar Amount Sold
	Rule 505	55	۱		e.	20.0
	Regulation A					
•			!		. \$_	
	Rule 504	0	1	<u> </u>	\$_	0.00
	Total		,		\$_	0.00
	a. Furnish a statement of all expenses in connection with the issuance and distribution of the		į			
<u>. </u>	securities in this offering. Exclude amounts relating solely to organization expenses of the insurer.		ı	·		
	The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					: :-::
						100.00
	Transfer Agent's Fees				\$	
	Printing and Engraving Costs		.ļ .		\$ _	
	Legal Fees			\mathbf{Z}	s_ 2	2,500.00
	Accounting Fees			П	\$_	,
-	Engineering Fees				<u>s</u>	
	Sales Commissions (specify finders' fees separately)		.1		·_	
•			,		<i>*</i> —	
	Other Expenses (identify)				• •	2 600 00
	Total				\$	2,600.00

	b. Enter the difference between the aggregate offering price given in response to Part C — Question and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted groproceeds to the issuer."	SS	s156,400.00
•	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate at check the box to the left of the estimate. The total of the payments listed must equal the adjusted groproceeds to the issuer set forth in response to Part C — Question 4.b above.	nd ·	
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		
	Purchase of real estate	🗆 \$	_ 🗆 \$
	Purchase, rental or leasing and installation of machinery and equipment		_ 🗆 \$
	Construction or leasing of plant buildings and facilities	🗀 \$	s
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[\$	s
	Repayment of indebtedness	🗆 s	
	Working capital		s
	Other (specify):		_ 🗆 \$
		- ; □\$	D\$
	Column Totals	🔲 \$_0.00	☑ \$ 156,400.00
	Total Payments Listed (column totals added)	I 🔀 🖫	156,400.00
Ī	DATEDERALSIGNATURE		
gı	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this not mature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Comme information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) or	nission, upon writ	
SSI	uer (Print or Type) Signature	Date ,	
٥u	ureSpectrum, Inc.	10/24/2006	
 [me of Signer (Print or Type) Title of Signer (Print or Type)		· · · · · · · · · · · · · · · · · · ·
ш			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

STÄT		

1.	Is any party described in 17 CFR 230.262	presently subject to	any of the	lisqualification		Yes	No
	provisions of such rule?				:		K
		•	•				

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

in the state of th	
Issuer (Print or Type)	Signature Date
PureSpectrum, Inc.	10/24/2006
Name (Print or Type)	Title (Print or Type)
Lee L. Vanatta	President

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	<u> </u>			<u>AP</u>	PENDIX			
الد	to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rehased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes No
AL						/ /		
AK				,			. 1	
AZ								
AR							7	
CA					, .			
СО								
СТ			•				7	
DE						,		
DČ	`						;	
FL							,	
GA′	-]			,		, t	
НІ						, * *		
ID	,							
π	•		· · · · · · ·	·			!	
IN							!	
IA				,				
KS		·						
KY		:			,	:		
LA	,						1 /	
МЕ	,	-					•	
MD								
MA	1.			, -				
MI		<u> </u>					!	
MN	ĺ.	<u> </u>						
MS				,		·		

		<i>!</i>			NINTY				
1	2		3 Type of security	4			5 Disqualification under State ULOI		te ULOE
,		to sell	and aggregate					(if yes,	
		ccredited	offering price offered in state	Type of investor and				explana	ition of granted)
	investors in State (Part B-Item 1)		(Part C-Item 1)	amount purchased in State (Part C-Item 2)				Item 1)	
	(ran D-nem 1)		(1241 ()-1011 1)	NT	Number of		• :	(1212	
•	1			Number of Accredited		Number of Non-Accredited	· t		. [
State	Yes	No	·	Investors	Amount	Investors	Amount	Yes	No
МО				<u> </u>	•				
MT	,				1.				
NE		·				/			
NV		r	•		-		1		
. NH	· ·						1		
NJ		3					1		
NM					-				
NY									
NC						•			
ND						-			
ОН			·						
ОК			!						
OR									
PA	-						- 1		
RI	1								
SC		,		,	•				
SD				-			,		
TN							i	-7	
TX		×	common stock \$120 405	1	\$120,405.00		; ,		×
UT							; :		
VT					•	,			
VA	ļ. 								
WA.									
WV									
WI		21	_			,	}		

APPENDIX										
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	(Part C-1	iem 1)	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No No
WY	,			, *						
PR					, ,					